			Attorne	ey Docket No.	914-1464		
DECLARATION AND POWER OF		R OF	First N		William Richard	DYER	
ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION			1	COMPLETE IF KNOWN			
(37 CFR 1.63)		Applica	ation Number				
Declaration     Submitted     with Initial     Filing	Declaration Submitted after Initial Filing		Filing I	Date			
			Group	Art Unit			
			Exami	ner Name	:		
As a below named inventor, I h	nereby declar	e that:					
s a below hamed inventor, in	icieby deciai	e illai.					
ly residence, mailing address	, and citizens	ship are as	stated below	next to name.			
believe I am the original, first if plural names are listed belo nvention entitled: COMPUTEF	w) of the subj	ect matter	which is clai	med and for wh	ich a patent is so	uaht on the	
hereby state that I have revie laims, as amended by any an	wed and und	erstand th	e contents of	the above iden	tified specificatior	n, including the	
•	·	•					
acknowledge the duty to disc or continuation-in-part applica	lose informati	ion which i	is material to	patentability as	defined in 37 CF	R 1.56, includin	
pplication and the national or						date of the pric	
haraby alaim faraign ariarity b	onofito undo	. 25 11 0 0	140(a) (d)			(-)	
hereby claim foreign priority b nventor's certificate, or 365(a)	of any PCT i	nternation	al application	which designat	ed at least one co	ountry other tha	
ne United States of America, I	isted below a	nd have a	Iso identified	below, by check	king the box, any	foreign applicat	
or patent or inventor's certificant or which priority is claimed.	ate, or any PC	internat	ional applicat	ion having a filii	ng date before tha	at of the applica	
	<del></del>			<del></del>			
Prior Foreign Application Numbers	Country		Filing Date DD/YYYY)	Priority Not Claimed	Certified Copy YES	Attached?	
hereby claim the benefit unde	er 35 U.S.C. 1	19(e) of a	ny United Sta	ates provisional	application(s) list	ed below.	
Application Number(s)				Filing Date (MM/DD/YYYY)			
	······						

I or we hereby appoint the registered practitioner(s) associated with Customer No. **6449** to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number **6449**. I or we also appoint Thomas P. Schur, Reg. No. 30,683, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	[ ] A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) William Richard		Family Name: DYER or Surname							
Inventor's Signature William Rechard Dexi		Date / / / 7 / 0 /							
Residence: City: Plano	State: TEXAS	Country: U.S.A.	Citizenship: U.S.A.						
Mailing Address: 8900 Pocono Drive									
Mailing Address									
City: Plano	State: Texas	Zip: 75025	Country: U.S.A.						
NAME OF SECOND INVENTOR:	[ ] A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature		Date							
Residence: City	State	Country	Citizenship						
Mailing Address									
Mailing Address									
City NAME OF THIRD INVENTOR:	State	Zip	Country						
NAME OF THIRD INVENTOR:  [ ] A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature		Date							
Residence: City	State	Country	Citizenship						
Mailing Address									
Mailing Address									
City	State	Zip	Country						
NAME OF FOURTH INVENTOR:	[ ] A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature		Date							
Residence: City	State	Country	Citizenship						
Mailing Address									
Mailing Address									
City	State	Zip	Country						